

**ARIZONA CORPORATION COMMISSION**  
**UTILITIES DIVISION**

**ANNUAL REPORT MAILING LABEL – MAKE CHANGES AS NECESSARY**



E-01703A  
Duncan Valley Electric Cooperative, Inc.  
PO Box 440  
Duncan, AZ 85534

**ANNUAL REPORT**  
**RECEIVED**  
APR 19 2006  
Z Corporation Commissic  
Director of Utilities

**FOR YEAR ENDING**

|    |    |      |
|----|----|------|
| 12 | 31 | 2005 |
|----|----|------|

FOR COMMISSION USE

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|--------|----|
| ANN 01 | 05 |
|--------|----|

PROCESSED BY:

4-20-06 RF

SCANNED

## COMPANY INFORMATION

|   |  |  |  |
|---|--|--|--|
| <b>Company Name (Business Name)</b> <u>Duncan Valley Electric Cooperative, Inc.</u> |  |  |  |
| <b>Mailing Address</b> <u>PO Box 440</u>  |  |  |  |
| <u>Duncan</u><br>(City)   | <u>AZ</u><br>(State)                               | <u>85534</u><br>(Zip)                  |  |
| <u>928 359-2503</u><br>Telephone No. (Include Area Code)                            | <u>928 359-2370</u><br>Fax No. (Include Area Code) | <br>Pager/Cell No. (Include Area Code) |  |
| <b>Email Address</b> _____  |  |  |  |
| <b>Local Office Mailing Address</b> <u>Same as above</u>                            |  |  |  |
| <br>(City)  | <br>(State)  | <br>(Zip)                              |  |
| <br>Local Office Telephone No. (Include Area Code)                                  | <br>Fax No. (Include Area Code)                    | <br>Pager/Cell No. (Include Area Code) |  |
| <b>Email Address</b> _____  |  |  |  |

## MANAGEMENT INFORMATION

|  |  |  |                      |
|--|--|--|----------------------|
| <b>Management Contact:</b> <u>Jack Shilling</u>          |  |  |                      |
| <u>PO Box 440</u><br>(Street)                            |  | <u>Duncan</u><br>(City)                | <u>AZ</u><br>(State) |
| <u>85534</u><br>(Zip)                                    |  | <u>CEO</u><br>(Title)                  |                      |
| <u>928 359-2503</u><br>Telephone No. (Include Area Code) | <u>928 359-2370</u><br>Fax No. (Include Area Code) | <br>Pager/Cell No. (Include Area Code) |                      |
| <b>Email Address</b> <u>jack.shilling@dvcc.org</u>       |  |  |                      |
| <b>On Site Manager:</b> <u>Same as above</u>             |  |  |                      |
| <br>(Street)   | <br>(City)   | <br>(State)                            | <br>(Zip)            |
| <br>Telephone No. (Include Area Code)                    | <br>Fax No. (Include Area Code)                    | <br>Pager/Cell No. (Include Area Code) |                      |
| <b>Email Address</b> _____                               |  |  |                      |

☐ Please mark this box if the above address(es) have changed or are updated since the last filing.

**Statutory Agent:** Dallagher & Kennedy Lymike Mant  
 (Name)  
PO Box 32159 Phoenix AZ 85064-2159  
 (Street) (City) (State) (Zip)  
602-530-8000 602-257-9459  
 Telephone No. (Include Area Code) Fax No. (Include Area Code) Pager/Cell No. (Include Area Code)  
**Attorney:** Same as above  
 (Name)  
 (Street) (City) (State) (Zip)  
 Telephone No. (Include Area Code) Fax No. (Include Area Code) Pager/Cell No. (Include Area Code)

☐ Please mark this box if the above address(es) have changed or are updated since the last filing.

### OWNERSHIP INFORMATION

Check the following box that applies to your company:

- |   |   |
|---|---|
| <input type="checkbox"/> Sole Proprietor (S)    | <input type="checkbox"/> C Corporation (C) (Other than Association/Co-op) |
| <input type="checkbox"/> Partnership (P)        | <input type="checkbox"/> Subchapter S Corporation (Z)                     |
| <input type="checkbox"/> Bankruptcy (B)         | <input checked="" type="checkbox"/> Association/Co-op (A)                 |
| <input type="checkbox"/> Receivership (R)       | <input type="checkbox"/> Limited Liability Company                        |
| <input type="checkbox"/> Other (Describe) _____ |   |

### COUNTIES SERVED

Check the box below for the county/ies in which you are certificated to provide service:

- |                                     |                                   |  |
|-------------------------------------|-----------------------------------|--|
| <input type="checkbox"/> APACHE     | <input type="checkbox"/> COCHISE  | <input type="checkbox"/> COCONINO            |
| <input type="checkbox"/> GILA       | <input type="checkbox"/> GRAHAM   | <input checked="" type="checkbox"/> GREENLEE |
| <input type="checkbox"/> LA PAZ     | <input type="checkbox"/> MARICOPA | <input type="checkbox"/> MOHAVE              |
| <input type="checkbox"/> NAVAJO     | <input type="checkbox"/> PIMA     | <input type="checkbox"/> PINAL               |
| <input type="checkbox"/> SANTA CRUZ | <input type="checkbox"/> YAVAPAI  | <input type="checkbox"/> YUMA                |
| <input type="checkbox"/> STATEWIDE  |                                   |  |

## **SERVICES AUTHORIZED TO PROVIDE**

Check the following box/es for the services that you are authorized to provide:

☐ **Electric**

- ☐ Investor Owned Electric
- ☐ Rural Electric Cooperative
- ☒ Utility Distribution Company
- ☐ Electric Service Provider
- ☐ Transmission Service Provider
- ☐ Meter Service Provider
- ☐ Meter Reading Service Provider
- ☐ Billing and Collection
- ☐ Ancillary Services
- ☐ Generation Provider
- ☐ Aggregator/Broker

☐ **Telecommunications**

- ☐ Incumbent Local Exchange Carrier
- ☐ Interexchange Carrier
- ☐ Competitive Local Exchange Carrier
- ☐ Reseller
- ☐ Alternative Operator Service Provider

☐ **Gas**

- ☐ Natural Gas
- ☐ Propane

☐ **Other (Specify)** \_\_\_\_\_

\_\_\_\_\_

## **STATISTICAL INFORMATION**

### **TELECOMMUNICATION UTILITIES ONLY**

|   |          |
|---|----------|
| Total residence local exchange access lines           | _____    |
| Total business local exchange access lines            | _____    |
| Total revenue from Arizona operations                 | \$ _____ |
| Total income from Arizona operations                  | \$ _____ |
| Value of assets used to serve Arizona customers       | \$ _____ |
| Accumulated depreciation associated with those assets | \$ _____ |

## STATISTICAL INFORMATION (CONT'D)

### ELECTRIC UTILITY PROVIDERS ONLY

|                                    |                   |     |
|------------------------------------|-------------------|-----|
| Total number of customers          | <u>2508</u>       |     |
| Residential                        | <u>2167</u>       |     |
| Commercial                         | <u>253</u>        |     |
| Industrial                         |                   |     |
| Public street and highway lighting | <u>2</u>          |     |
| Irrigation                         | <u>86</u>         |     |
| Resale                             |                   |     |
| <br>Total kilowatt-hours sold      | <u>2,468,430</u>  | kWh |
| Residential                        | <u>15,439,608</u> |     |
| Commercial                         | <u>3,481,911</u>  |     |
| Industrial                         |                   |     |
| Public street and highway lighting | <u>114,840</u>    |     |
| Irrigation                         |                   |     |
| Resale                             | <u>2,038,266</u>  |     |
| <br>Maximum Peak Load              | <u>5740</u>       | MW  |

### GAS UTILITIES ONLY

|                           |  |        |
|---------------------------|--|--------|
| Total number of customers |  |        |
| Residential               |  |        |
| Commercial                |  |        |
| Industrial                |  |        |
| Irrigation                |  |        |
| Resale                    |  |        |
| <br>Total therms sold     |  | therms |
| Residential               |  |        |
| Commercial                |  |        |
| Industrial                |  |        |
| Irrigation                |  |        |
| Resale                    |  |        |

VERIFICATION  
AND  
SWORN STATEMENT  
Intrastate Revenues Only

RECEIVED

APR 19 2006

Z Corporation Commission  
Director of Utilities

VERIFICATION

STATE OF \_\_\_\_\_  
I, THE UNDERSIGNED  
OF THE

|                                |  |
|--------------------------------|--|
| COUNTY OF (COUNTY NAME)        | Greenlee                                 |
| NAME (OWNER OR OFFICIAL) TITLE | Jack Shilling CEO                        |
| COMPANY NAME                   | Duncan Valley Electric Cooperative, Inc. |

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

| MONTH | DAY | YEAR |
|-------|-----|------|
| 12    | 31  | 2005 |

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS DURING CALENDAR YEAR 2005 WAS:

Arizona Intrastate Gross Operating Revenues Only (\$)

\$ 2,226,051

(THE AMOUNT IN BOX ABOVE  
INCLUDES \$ 143,173  
IN SALES TAXES BILLED, OR COLLECTED)

\*\*REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER REASON, THE REVENUE REPORTED ABOVE DOES NOT AGREE WITH TOTAL OPERATING REVENUES ELSEWHERE REPORTED, ATTACH THOSE STATEMENTS THAT RECONCILE THE DIFFERENCE. (EXPLAIN IN DETAIL)

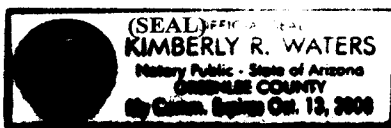
Jack Shilling  
SIGNATURE OF OWNER OR OFFICIAL  
928-359-2503  
TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS 17<sup>th</sup> DAY OF

|             |              |
|-------------|--------------|
| COUNTY NAME | Greenlee     |
| MONTH       | April        |
|             | 20 <u>06</u> |



Kimberly R. Waters  
SIGNATURE OF NOTARY PUBLIC

MY COMMISSION EXPIRES 10/13/2008

VERIFICATION  
AND  
SWORN STATEMENT  
RESIDENTIAL REVENUE  
INTRASTATE REVENUES ONLY

**RECEIVED**

APR 19 2006

Z Corporation Commission  
Director of Utilities

STATE OF ARIZONA

I, THE UNDERSIGNED

OF THE

|  |                  |
|--|------------------|
| COUNTY OF (COUNTY NAME) <u>Greenlee</u>                      |                  |
| NAME (OWNER OR OFFICIAL) <u>Jack Shilling</u>                | TITLE <u>CEO</u> |
| COMPANY NAME <u>Duncan Valley Electric Cooperative, Inc.</u> |                  |

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

|       |     |      |
|-------|-----|------|
| MONTH | DAY | YEAR |
| 12    | 31  | 2005 |

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

**SWORN STATEMENT**

IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2005 WAS:

|  |
|--|
| ARIZONA INTRASTATE GROSS OPERATING REVENUES<br><br>\$ <u>1,701,080</u> |
|--|

(THE AMOUNT IN BOX AT LEFT  
INCLUDES \$ 109,983  
IN SALES TAXES BILLED, OR COLLECTED

\*RESIDENTIAL REVENUE REPORTED ON THIS PAGE  
MUST INCLUDE SALES TAXES BILLED.

X Jack Shilling  
SIGNATURE OF OWNER OR OFFICIAL  
  
928-359-2503  
TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

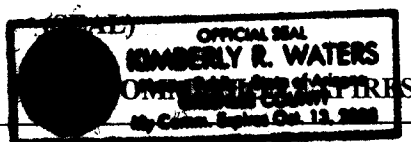
A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

17th

DAY OF

|  |              |
|--|--------------|
| NOTARY PUBLIC NAME <u>Kimberly R. Waters</u> |              |
| COUNTY NAME <u>Greenlee</u>                  |              |
| MONTH <u>April</u> <u>17th</u>               | 20 <u>06</u> |



10/13/2008

X Kimberly R. Waters  
SIGNATURE OF NOTARY PUBLIC

## **FINANCIAL INFORMATION**

Attach to this annual report a copy of the companies' year-end (Calendar Year 2005) financial statements. If you do not compile these reports, the Utilities Division will supply you with blank financial statements for completion and filing. **ALL INFORMATION MUST BE ARIZONA-SPECIFIC AND REFLECT OPERATING RESULTS IN ARIZONA.**